

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18775

FILED
Apr 07, 2009
Secretary of State

Entity Name: GREENBRIAR VILLAGE CONDOMINIUM ASSOCIATION, INC., AT THE HIDEAWAY COUNTRY CLUB

Current Principal Place of Business:

5910 TRAILWIND DR
422
FORT MYERS, FL 33907 US

New Principal Place of Business:

5910 TRAILWIND DR
FORT MYERS, FL 33907 US

Current Mailing Address:

5910 TRAILWIND DR
422
FORT MYERS, FL 33907 US

New Mailing Address:

C/O REALTY SERVICES
2525 PARKWA STREET
FORT MYERS, FL 33901 US

FEI Number: 65-0065588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, JOSEPH W
5910 TRAILWIND DR, #422
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

REALTY SERVICES
2525 PARKWAY STREET
FORT MYERS, FL 33901 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL MCVETY

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GEE, MICHAEL
Address: 5910 TRAILWIND DR, #415
City-St-Zip: FORT MYERS, FL 33907

Title: SD () Delete
Name: CREEM, PATRICIA
Address: 5850TRAILWINDS #715
City-St-Zip: FORT MYERS, FL 33907

Title: VP () Delete
Name: DANIELS, BURT
Address: 5810 TRAILWINDS DR # 916
City-St-Zip: FORT MYERS, FL 33907

Title: TD () Delete
Name: HUBER, VERONICA
Address: 5870 TRAILWINDS DR # 622
City-St-Zip: FORT MYERS, FL 33907

Title: PD () Delete
Name: THOMPSON, JOSEPH W
Address: 5910 TRAILWINDS #422
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VERONICA HUBER

T

04/07/2009

Electronic Signature of Signing Officer or Director

Date